Wyoming Prevention Framework Community Grant Report

Attachment B		
This report is for this time period		Please email this report as an attachment to
February 2007 - June 30, 2007		Substance Abuse & Mental Health Services Division, Wyo Dept. of Health lisa.laake@health.wyo.gov
Today's Date	5/8/2007	For information call 1-800-535-4006
County	NATRONA	or 307-777-6494
Contract Organization Name	Natrona County Prevention Coalition	
	·	
Your Name	Jennifer Crank	
		Please keep both a hard-copy and file copy for your
Your Mailing Address	425 Cy Ave.	records
City, State, Zip	Casper, WY, 82601	
Your Work Phone Number	307-265-7366	
Fax	307-473-2650	
Your Work Email Address	jcrank@mercerwy.org	
	<u></u>	

			Percent		
	Outrast Dellarables	Data das	Completed (or notes on amount	Date	Occurrents on Notes
Item	Contract Deliverables	Date due	completed)	Completed	Comments or Notes
	Staff, Board of Directors, Volunteers, Work				
<u> </u>	Assignments, and Technical Assistance SPF Staff Hired (report name, percent of time,	1	l	l	
	email address, phone number)	1-Feb-07	100%	5/7/2007	We had trouble getting applicants for the position
	ernan address, priorie namber)	110007	10070	3/1/2001	The flat trouble getting applicants for the position
2	Supervise SPF staff/staff evaluation (note dates and any notes)				All employees are overseen by Brenda Eickoff-Johnson. Evaluations are once year depending of DOH
3	Name, title, and phone number of the staff's supervisor				Melissa Stahley-Cummings, Chair, 307-265-7366
	Criminal history record compliance (briefly note yes or no if any action was taken this quarterdo not report names)		We run criminal checks on all staff.		No reports needed "action"
_	Staff training and paid travel	Needs Assessment Training	1009/	March 5th-7th	Jennifer Crank attended
	(list all training paid under the contract, dates, traveler name, amount)	Trailing	100%	March Sur-7 ur	Jennier Grank attenueu
	Notify the Division of any board of directors/staffing changes				No changes to report
7	Other Contract Work Agreements (report details)	Not Defined			We are working with WYSAC to get a survey done
	Complete agreement with SPF-TAC Other				TBA
9	Other				NA
В	Needs Assessment Activities				
1	Needs Assessment Training/Winter 07 Meeting	Feb or March 2007	100%		Jennifer Crank Attended
	Needs Assessment Instrument Received	Feb or March 2007	100%		
	Data Collection	Apr-07	100%	7-Apr	
	Data Analysis	NA	50%		
	Priorities Identified	NA			
	Needs Assessment Sent to SAD	1-Jun-07			
7	Receive SAD Comments @ Needs Assessment	15-Jun-07			
	Revise Needs Assess/Submit Final	NA			
8	Other	NA			

			Percent	Date	
Item	Contract Deliverables	Date due	Completed	Completed	Comments or Notes
С	Community Infrastructure Activities				
	Community Advisory Council Activities				Helped with Needs Assessment Workbook. Helped
1	briefly list CAC activities				come up with questions for WYSAC study.
				3-19-2007, 4-	
	Community Advisory Council Meetings			18-2007, 5-	
2	List dates & number of people who attended			15/2007	March- 4 people, April- 6 people
	See below for membership report				

	Budget and Funding Approved by CAC (attach				
		March 15th 2007	100%	March 15th	See attached minutes
	Community Resource Assessment				
4	note date and attach report	NA			
5	Present Findings/Process to Community	NA			
	(Optional) local SAPST and/or CADCA Training for				
6	SAC/Community	NA			
					The community helped with the needs assessment
	Briefly describe how the community was involved				workbook and they helped shape our survey we are
7	in the SPF process during this reporting period				contracting WYSAC to do.
8	Other CAC/Infrastructure	NA			
D	Strategic Planning Activity				
	Attend Strategic Planning Training	Jul-07			
		NA			
	Research Evidence Based Strategies	NA			
	Match Strategies to Data/Needs	NA			
	3	NA			
		NA			
	Receive SAD Comments/Revise/Final Plan	31-Aug-07			
	Other	NA			

			Percent	Date	
Item	Contract Deliverables	Date due	Completed	Completed	Comments or Notes
E	Implementation (only with SAD approval)	NA			

F Deliverables and Assurances

Reports

	For February 1 - April 30				
	May 15: Submit this report to SAD	15-May-07	100%	5/14/2007	
2	May 15: Submit Expenditure Report to SAD	15-May-07	100%	5/14/2007	
	For February 1 - June 30				
3	July 31: Submit CLI to SAMHSA	31-Jul-07			
	For May 1 - June 30				
4	July 31: Submit Expenditure Report to SAD	31-Jul-07			
	For May 1 - September 30				
5	October 15: Submit this report o SAD	15-Oct-07			
	For July 1 - September 30				
6	October 15: Submit Expenditure Report to SAD	15-Oct-07			
_				. / /	
	Complete evaluation agreement with WySAC	30-Mar-07	100%	3/20/2007	
	Provide any other evaluation information				
	Submit any requested data				
	Obtain Chapter 16 Prevention Certification				
	On-Site evaluations or reviews				
	Post 2 newspaper ads/articles about the SPF grant				
12	(attach copy)				

Item	Contract Deliverables	Date due	Percent Completed	Date Completed	Comments or Notes
G	Other Information		•	-	
	Briefly describe any actions taken by the LEAD				
	AGENCY (fiscal agency) board of directors or high				
1	level staff around the SPF SIG grant				We are contracting with WYSAC to take a survey
	Restricted activities (report any approval				
2	requested and received for these)				N/A
	fairs/brochures/educational materials				N/A
	media				N/A
	Please note any significant changes from the				
3	budget submitted in the application.				We changed the Indirect Cost and the equipment lines
	What was the one greatest accomplishment this				
	reporting period? How was this accomplishment				We have most of the Needs Assessment Workbook
4	shared with the community?				done.
					The grant period is so short this first year it makes
	What was the one greatest barrier this reporting				everything difficult. Such as spending the full award
5	period? What was done to address this barrier?				amount.

	Please briefly list any significant changes or		
6	information related to this grant		NA
	Please provide input and recommendations about		
	technical assistance provided by SAD and SAD		
7	contractors		NA

COMMUNITY ADVISORY COUNCIL

_	COMMUNITY ADVISORY COUNCIL				
	Member's Name	Date first joined	Number of meetings attended (total to date)	Please note if this is a representative of the sectors listed on page 6 of the application instructions.	Agency or Constituency Represented
	Jennifer Crank	Beginning	3	X	Natrona County Prevention Coalition
	Melissa Stahley-Cummings	Beginning	2	X	Wyoming First Lady's Initiative
	Brenda Evans	Beginning	3		Brain Injury Association
		Beginning	1	X	Department of Family Services
	Stephanie Moles	3/15/2007	3		Woman's Heart
	Debbie Taylor	3/15/2007	3		MADD
	Darcy Dixon	Beginning	1	X	Youth Empowerment Council
		Beginning	1	X	Mercer House
	Sharon Farquhar	3/15/2007	1		Community Health Department
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					Please note all members listed in contract are invited to the CAC meetings. Due to scheduling are not able to attend. They do attend our monthly Coalition meetings.